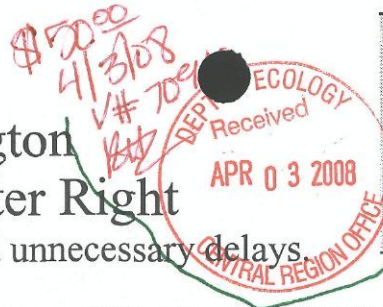




State of Washington  
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.



Fee Paid 50  
Date \_\_\_\_\_  
For Ecology Use

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Sandra Morehead Hulteen Home Tel: (360) 352-9733  
Mailing Address 2508 Simon Lane NE Work Tel: (360) 791-0787  
City Olympia State Wa Zip+4 98506 + 3555 FAX: ( ) -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name \_\_\_\_\_ Home Tel: ( ) -  
Mailing Address \_\_\_\_\_ Work Tel: ( ) -  
City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_ + \_\_\_\_\_ FAX: ( ) -  
Relationship to applicant \_\_\_\_\_

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 2 (☒ gallons per minute or ☐ cubic feet per second) from a ☒ surface water source or ☐ ground water source (check only one) for the purpose(s) of household water use for recreational cabin drinking hygiene. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient. Estimate a maximum annual quantity to be used in acre-feet per year: estimate approx 15 gal/day 30 days per year = 450 acre ft / yr.  
☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:  
From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Section 4. WATER SOURCE

If SURFACE WATER					If GROUNDWATER			
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: <u>Canoe Creek</u>					A permit is desired for _____ well(s).			
Number of diversions: _____								
Source flows into (name of body of water): <u>Lake Chelan</u>					Size & depth of well(s):			
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:								
1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
NE corner	NE corner					Lot	Block	Subdivision
<u>2 1/4 100'S</u>	<u>4 1/4 100' W</u>	<u>5</u>	<u>30</u>	<u>19 E</u>	<u>Chelan</u>			
For Ecology Use Date Received: <u>04/03/2008</u> Priority Date: <u>04/03/2008</u>								
SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # _____								
Date Accepted As Complete _____ By _____ Date Returned _____ By _____ WRIA: <u>47-Chelan</u>								

Appl. No.: 54-35171



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: Special Use Permit - Old Cabin
- B. Briefly describe your proposed water system. (See instructions.)  
intake pipe in creek approx 1/4 mile up creek from lake shore. 100' of intake pipe (2") resting in creek to water retention box. Approx 400' of gravity fed water supplied to cabin for kitchen and hygiene uses. Water retention box @ creek site is approx. 24" x 30" x 30"
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO  
PROVIDE DOCUMENTATION.

## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 1 Type of connection recreational cabin  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☒ NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: \_\_\_\_\_
- B. List total number of acres for other specified agricultural uses:
- |           |             |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: \_\_\_\_\_
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 6000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses:  
Stockwater - Total # of animals \_\_\_\_\_ Animal type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_



## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☒ YES ☐ NO

water retention box @ creek intake site, size approx. 24" W x 30" H x 30" W  
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Canoe Creek, Old Cabin Lake Chelan  
No access available by road, boat or float plane only.  
Commercial boat/airplane services available in  
Chelan, Wash -

## Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☐ YES ☒ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

No. land is owned by USDA - Forest Service;  
cabin lot is used via a Special Use Permit granted  
by the Forest Service

B. Does the applicant own the land on which the water source is located?

☐ YES ☒ NO

If no, submit a copy of agreement:

Land is owned by USDA - Forest Service & accessed  
via Special Use Permit - copy attached. Historical use since

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me. ca 1920

Sandra Stulteen

Applicant (or authorized representative)

3.31.08

Date

Sandra Stulteen permittee

Landowner for place of use (if same as applicant, write "same")

3.31.08

Date



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s) is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by (date).	

Ecology staff Date

Ecology is an Equal Opportunity employer. To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).